

DE

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

| JUL 0 5 2007 PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION 209 | 3 |
|--|---|
| Name of Offering (Lack if this is an amendment and name has changed, and indicate change ILI ACQUISITION CORP. ACQUISITION OF TOOKE ROCKIES, INC. AND DISCOVERY I | OGGING, INC. PHOCESS |
| Filing Under (check box(es) that apply: [] Rule 504 [] Rule 505 [X] Rule 506 [X] Section Type of Filing: [X] New Filing [] Amendment | 4(6) [X] ULOE JUL: 1 2 2007 THOMSON |
| A. BASIC IDENTIFICATION DATA | FINANCIA |
| Enter the information requested about the issuer | |
| Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) ILI ACQUISITION CORP. | |
| Address of Executive Offices (Number and Street, City, State, Zip Code) 6550 West Same Houston Parkway, Suite 250, Houston, TX 77041 | Telephone Number 713-849-7800 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) (If different from Executive Offices) | Telephone Number |
| Brief Description of Business Mud Logging Service | |
| Type of Business Organization [X] Corporation [] limited partnership, already formed [] Business Trust[] limited partnership, to be formed |] other (please specify): |
| Actual or Estimated Date of Incorporation or Organization 01 06 [X] Actual Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation | [] Estimated for State: |

CN for Canada; FN for other foreign jurisdiction)

| A. BASIC IDENTIFICATION DATA |
|--|
| 2. Enter the information requested for the following: |
| • Each promoter of the issuer, if the issuer has been organized within the past five years; |
| • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class |
| of equity securities of the issuer; |
| • Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership |
| issuers; and |
| Each general and managing partner of partnership issuers. |
| Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner |
| Cherington, Charles |
| Full Name (Last name first, if individual) |
| |
| c/o Cherington Capital LLC, 29 Buckingham , Cambridge, MA 02138 |
| Business or Residence Address (Number and Street, City, State, Zip Code) |
| |
| Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or |
| Managing Partner |
| Babcock, Kenneth |
| Full Name (Last name first, if individual) |
| |
| c/o Cherington Capital LLC, 29 Buckingham, Cambridge, MA 02138 |
| Business or Residence Address (Number and Street, City, State, Zip Code) |
| |
| Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner |
| Beard, Gregory |
| Full Name (Last name first, if individual) |
| a/a Disconstante Haldings LLC 410 Diff. Assessed New York, NRV 10010 |
| c/o Riverstone Holdings LLC, 412 Fifth Avenue, New York, NY 10019 |
| Business or Residence Address (Number and Street, City, State, Zip Code) |
| Cheel Device) that Annie [] Devices [] Devices [] Devices [] Country [] C |
| Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or |
| Lancaster, N. John |
| Full Name (Last name first, if individual) |
| Tun Paine (East hame first, ii mutvidual) |
| c/o Riverstone Holdings LLC, 412 Fifth Avenue, New York, NY 10019 |
| Business or Residence Address (Number and Street, City, State, Zip Code) |
| Dustiness of Residence Address (Evalued and Succes, City, State, 21p Code) |
| Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or |
| Managing Partner |
| Padgett, Sean S. |
| Full Name (Last name first, if individual) |
| a with a time to the time of time of time of the time of time |
| 6550 West Sam Houston Parkway N. Suite 250, Houston, TX 77041 |
| Business or Residence Address (Number and Street, City, State, Zip Code) |
| · · · · · · · · · · · · · · · · · · · |

| A. BASIC IDENTIFICATION DATA |
|--|
| Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner |
| Ryan, Leigh Ann |
| Full Name (Last name first, if individual) |
| 6550 West Sam Houston Parkway N, Suite 250, Houston, TX 77041 |
| Business or Residence Address (Number and Street, City, State, Zip Code) |
| Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner |
| Rivet, Roger |
| Full Name (Last name first, if individual) |
| 6550 West Sam Houston Parkway N, Suite 250, Houston, TX 77041 |
| Business or Residence Address (Number and Street, City, State, Zip Code) |
| |
| Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner |
| Carlyle Riverstone Global Energy & Power III, L.P. Full Name (Last name first, if individual) |
| Tun Name (Last name first, if individual) |
| c/o Riverstone Holdings, LLC, 712 Fifth Avenue, New York, NY 10019 |
| Business or Residence Address (Number and Street, City, State, Zip Code) |
| Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or |
| Managing Partner Carlyle Riverstone Energy III Logging Partnership, LP |
| Full Name (Last name first, if individual) |
| ala Diramtana Haldinaa LLC 712 Fi2h Assaura Nasa Vada NIV 10010 |
| c/o Riverstone Holdings, LLC, 712 Fifth Avenue, New York, NY 10019 Business or Residence Address (Number and Street, City, State, Zip Code) |
| Dustiless of Residence Address (Number and Street, City, State, 2.19 Code) |
| Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner |
| Full Name (Last name first, if individual) |
| |
| Business or Residence Address (Number and Street, City, State, Zip Code) |
| |
| Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner |
| Full Name (Last name first, if individual) |
| |
| Business or Residence Address (Number and Street, City, State, Zip Code) |

| | | | | В. | INFORM | 1ATION | ABOUT | OFFER | ING | | | | |
|---|--|--|------------------------------------|--|---|---|---|---------------------------------------|-------------------------------------|-------------------------------------|------------------------------|------------------------------|-----------|
| l. Hs t | he issuer | | | | end to sel adix, Cole | | | | | offering? | , | Yes | No [X] |
| 2. Wha | it is the n | ninimum | investme | nt that w | ili be acc | epted from | m any inc | lividual? | | | | | \$12.50 |
| | | | | | | | | | | | | Yes | No |
| 3. Doe | s the offe | ering perr | nit joint (| wnership | of a sing | gle unit? | | | | | | [] | [X] |
| indirect sales of or deale more th | ily, any c securitie er registe an five (| ommissions on the control of the con | on or sime offering. the SEC | ilar remu If a perso and/or wi sted are a | n person value of the best of the left of | for solicit isted is an or states | ation of parties at associate, list the s | ourchaser ed person name of the | s in conn 1 or agen he broker | ection wi t of a bro or deale | th ker r. If | | |
| Full Na | me (Last | name fir | st, if indi | vidual) | | | | | | | | | |
| Busines | ss or Res | idence A | ddress (N | umber a | nd Street, | City, Sta | ite, Zip C | ode) | | | | | |
| | | | | | | | | | | | | | |
| Name o | of Associ | ated Brol | cer or De | aler | | | | | | | | | |
| States | n Which | Darson I | istad Un | or Inten | ds to Soli | oit Durch | ncero | | | <u> </u> | | | |
| States | | | | | | | 145015 | | | | | | |
| | (Check | "All Sta | tes" or ch | eck indiv | vidual Sta | ites) | | | | | [] All | States | |
| [AL] [IL] [MT] [RI] | [AK] [IN] [NE] [SC] | [AZ] [IA] [VN] [SD] | [AR] [KS] [NH] [TN] | [CA] [KY] [NJ] [TX] | [CO] [LA] [NM] [UT] | [CT] [ME] [NY] [VT] | [DE] [MD] [NC] [VA] | [DC] [MA] [ND] [WA] | [FL] [MI] [OH] [WV] | [GA] [MN] [OK] [WI] | [HI] [MS] [OR] [WY] | [ID] [MO] [PA] [PR] | |
| Full Na | me (Last | name fir | st, if indi | vidual) | | | | | | | | | |
| | | | | | | | | | | | | | |
| Busines | ss or Res | idence A | ddress (N | iumber ai | nd Street, | City, Sta | ite, Zip C | ode) | | | | | |
| Name o | of Associ | ated Brol | ker or De | aler | | | | | | | | | |
| States i | n Which | Person L | isted Has | or Inten | ds to Sol | icit Purch | asers | | | | | | |
| | (Check | "All Sta | tes" or ch | eck indiv | vidual Sta | ites) | | | | | [] All | States | |
| [AL] [IL] [MT] [RI] | [AK] [IN] [NE] [SC] | [AZ] [IA] [VN] [SD] | [AR] [KS] [NH] [TN] | [CA] [KY] [NJ] [TX] | [CO] [LA] [NM] [UT] | [CT] [ME] [NY] [VT] | [DE] [MD] [NC] [VA] | [DC] [MA] [ND] [WA] | [FL] [MI] [OH] [WV] | [GA] [MN] [OK] [WI] | [HI] [MS] [OR] [WY] | [ID] [MO] [PA] [PR] | |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | ı | |
|---|---------------------|----------------------------|
| | Aggregate | Amount |
| Type of Security | Offering Price | Already Sold |
| Debt | \$ -0- | • |
| Equity | \$2,000,000 | \$1,180,000 |
| [X] Common [] Preferred | | |
| Convertible Securities (including warrants) | \$ -0- | \$ -0- |
| Partnership Interests | \$ -0- | • |
| Other (Specify) | \$ -0- | \$ -0- |
| Total | \$2,000,000 | \$1,130,000 |
| Answer also in Appendix, Column 3, if filing under ULOE | | |
| 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or zero." | | |
| | Number | Aggregate |
| | Number Investors | Dollar Amount of Purchases |
| Accredited Investors | | |
| Non-accredited Investors | 3 0 | \$1,180,000 \$ -0- |
| | U | \$ - 0- |
| Total (for filing under Rule 504 only) | | |
| Answer also in Appendix, Column 4, if filing under ULOE | | |
| 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1. | | D. II. |
| Time of Offering | T | Dollar Amount |
| Type of Offering Rule 505 | Type of Security | Sold |
| Regulation A | | |
| Rule 504 | | |
| Total | | |
| 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees | רי | -0- |
| · · · · · · · · · · · · · · · · · · · | l J | -0- |
| Printing and Engraving Costs | l J | -0- |
| Legal Fees | [] f 1 | -0- |
| Accounting Fees | į j | -0- -0- |
| Engineering Fees Sales Commissions (specify finders' fees separately) | l J | -U- -0- |
| | L J r i | -0- |
| Other Expenses (identify): Finders' fees Total | L J | -0- -0- |
| I Otal | | -0- |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregat3e3 offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$2,000,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b. above.

| | Off Direc | ents to icers, tors, & liates | Payments to Others | | |
|--|---------------|--|-----------------------|---------|--|
| Salaries and fees | []\$ | -0- | []\$ | -0- | |
| Purchases of real estate | []\$ | -0- | []\$ | -0- | |
| Purchases, rental or leasing and installation of machinery and equipment | []\$ | -0- | []\$ | -0- | |
| Construction or leasing of plant buildings and facilities | []\$ | -0- | []\$ | -0- | |
| Acquisition of other businesses (including the value of securities involved in | | | | | |
| this offering that may be used in exchange for the assets or securities of | | | | | |
| another issuer pursuant to a merger) | []\$ | -0- | []\$2,0 | 000,000 | |
| Repayment of indebtedness | î İ \$ | -0- | []\$ | -0- | |
| Working capital | []\$ | -0- | []\$ | -0- | |
| Other (specify): | []\$ | -0- | []\$ | -0- | |
| Column Totals | []\$ | -0- | []\$ | -0- | |
| Total Payments Listed (column totals added) | | [] \$2,000 |),000 | | |

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.\

| Issuer (Print or Type) ILI ACQUISITION CORP. | Signature Sem P- | Date 6/27/07 |
|--|---------------------------------|--------------|
| Name of Signer (Print or Type) | Title of Signer (Print of Type) | |
| SEAN PACKETT | EXECUTIVE VICE, | PARSIDENS |

E. STATE SIGNATURE 1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions Yes No of such rule? [] [X]

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

| Issuer (Print or Type) ILI ACQUISITION CORP. | Signature Sem Par | Date 6 / 27 /07 | _ |
|--|---------------------------------|-----------------|---|
| Name of Signer (Print or Type) | Title of Signer (Print or Type) | | _ |
| SEAN PARCETT | EXELUTURE VICE | PRESIDENT | |

APPENDIX

| 1 | Intend to non-a investor | to sell ccredited s in State – Item 1) | 3 Type of security and aggregate offering price offered in state (Part C – Item 1) | Type of investor and Amount purchased in State (Part C – Item 2) | | | | 5 Disqualification under State ULOE (If yes, attach explanation of waiver granted) (Part E – Item 1) | |
|----------|--------------------------------|---|--|--|-------------|-------------------------------|-------------|--|--|
| | | | | Number of | | Number of | | | |
| State | 37 | Nt. | | Accredited | A - | Non-accredited Investors | A | Yes | No. |
| AL | Yes | No | | Investors | Amount | investors | Amount | 1 68 | No |
| AK | | | | | | | | | |
| AZ | | - | | | | | | | |
| AR | | | | | | | | | |
| CA | | | | | | | | | |
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| CT | | | | | | | | | |
| DE | | | | | | | | | |
| DC | | | | | | | | | |
| FL | | | | | | | | | |
| GA | | | | | <u> </u> | | | | <u> </u> |
| HI | | | | | | | | | |
| ID IL | | | | | | | | | <u> </u> |
| IN | | | | | | | | | |
| IA | | | | | | | | | |
| KS | | - | | | | | | | |
| KY | | | | | | | | | |
| LA | | | | | | | | | |
| ME | | | | | | | | | |
| MD | | | | | | | | | |
| MA | | | | | | | | | |
| MI | | | | | | | | | |
| MN | | | | | | | | | |
| MS | | | | | | | | | <u> </u> |
| MO | | <u> </u> | | i | | | <u></u> | | <u> </u> |
| MT | | | | | | | | | |
| NE NV | | | | | | | | | |
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| SD | <u></u> | <u> </u> | | | | | | | |

| | i ' | | | APP | ENDIX | | | | | | |
|-------|-----------|------------|-----------------------------|------------|-------------|----------------|--------|------------------|---------|--|--|
| 1 | 1 2 3 4 5 | | | | | | | | | | |
| | | | | | | | | Disqualification | | | |
| | | | Type of security | | ι | | | | | | |
| | Intend | to sell | and aggregate | | | | | (If yes, | attach | | |
| | to non-a | ccredited | offering price | | | vestor and | | explana | tion of | | |
| | | s in State | offered in state | | | hased in State | | waiver g | | | |
| | (Part B | - Item 1) | (Part C – Item 1) | | (Part C | - Item 2) | | (Part E - | Item 1) | | |
| j ' | | | | Number of | | Number of | | | 1 | | |
| | | , | | Accredited | | Non-accredited | | | | | |
| State | Yes | No | | Investors | Amount | Investors | Amount | Yes | No | | |
| TN | <u> </u> | | | | | | | | | | |
| TX | | X | Common Stock \$2,000,000 | 2 | \$1,180,000 | 0 | 0 | _ | X | | |
| UT | | | | | | | | | | | |
| VT | | | | | | | | | | | |
| VA | | | | | | | | | | | |
| WA | | | | | | | | | | | |
| WV | | | | | | | | | | | |
| WI | | | | | | • | | | | | |
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